

Internship Application

November 28, 2006

Congressman Ryan

Representing Ohio's Seventeenth Congressional District

Internship Application

Full Name: _____

Home Address:

School Address:

Phone: _____

E-mail Address: _____

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In which office(s) would you prefer to intern?

District Office _____ Washington, D.C. Office _____ Either _____

Dates and hours available to participate in the program (be as specific as possible):

College or University: _____

Current year: _____ Freshman, _____ Sophomore, _____ Junior, _____ Senior,

_____ Grad Student (If so, what degree program? _____)

MAJOR: _____ MINOR: _____

Are you planning to get academic credit for this internship? _____

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If YES, number of course credits you anticipate: _____

Name and phone of program coordinator: _____

Please include a copy of course requirements/expectations.

How did you learn about this program? _____

Describe your familiarity with computers, list specific software knowledge:

PART II: Please attach a resume

Return the completed form and attachments to:

Internships in Washington Office

U.S. Representative Tim Ryan

1421 Longworth House Office Building

Washington, D.C. 20515

Fax: 202-225-3719

Attn: Intern Coordinator

Internships in Ohio:

U.S. Representative Tim Ryan

197 West Market St.

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Warren, OH 44481

Fax: 330-373-0098

Attn: District Intern Coordinator